



FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 130

Complete if Known

Application Number	09/990,099
Filing Date	November 21, 2001
First Named Inventor	LESLEY, Scott A.
Examiner Name	SULLIVAN, Daniel M.
Group / Art Unit	1636
Attorney Docket No	P0012US20

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)			
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES			
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 50-1885 Deposit Account Name: GENOMICS INSTITUTE OF THE NOVARTIS RESEARCH FOUNDATION					
The Commissioner is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account					
FEE CALCULATION					
1. BASIC FILING FEE					
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	
SUBTOTAL (1)					(\$ 0)
2. EXTRA CLAIM FEES					
Total Claims		** =	Extra Claims	Fee from below	Fee Paid
Independent Claims		** =	0	0	0
Multiple Dependent		X			0
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	
103	18	203	9	Claims in excess of 20	
102	84	202	42	Independent claims in excess of 3	
104	280	204	140	Multiple dependent claim, if not paid	
109	84	209	42	** Reissue independent claims over original patent	
110	18	210	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$ 0)
**or number previously paid, if greater; For Reissues, see above					
		Other fee (specify) _____			
		*Reduced by Basic Filing Fee Paid			
		SUBTOTAL (3) (\$ 130)			

SUBMITTED BY		Complete (if applicable)				
Name (Print/Type)	Timothy L. Smith	Registration No	Attorney/Agent)	35,367	Telephone	858-812-1547
Signature		Date	May 17, 2002			

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

PATENT

US Patent and Trademark Office, Box PGPUB Drawings
PO Box 2327
Arlington VA 22202

On May 17, 2002

By

July 2 Smith

Attorney Docket No.: P0012US20

MAY 21 2002

PATENT & TRADE MARK

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

LESLEY, Scott A.

Application No.: 09/990,099

Confirmation No.: 1291

Filed: November 21, 2001

For: SOLUBILITY REPORTER GENE
CONSTRUCTS

Art Unit: 1636

Examiner: SULLIVAN, Daniel M.

PETITION UNDER 37 CFR § 182 REQUESTING ENTRY OF REPLACEMENT DRAWINGS

US Patent and Trademark Office, Box PGPUB Drawings
PO Box 2327
Arlington VA 22202

Sir:

Applicants respectfully petition under 37 CFR § 182 for entry of the enclosed replacement drawings (sheets 1-4) to replace the originally filed drawings. The replacement drawings are more suitable for publication than the originally filed drawings. Authorization to charge the requisite fee pursuant to 37 CFR § 1.17(h) to Deposit Account 50-1885 is enclosed herewith.

Respectfully submitted,

Timothy L. Smith, Ph.D.
Reg. No. 35,367

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